Electronic Filing System (EFS) Data Electronic Patent Application Submission USPTO Use Only

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14038

Application ID:

09683888

FIBER OPTIC SCINTILLATOR WITH

OPTICAL GAIN FOR A COMPUTED

Title of Invention:

TOMOGRAPHY SYSTEM AND

METHOD OF MANUFACTURING

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First Named Inventor:

David Hoffman

Domestic/Foreign Application:

Domestic Application

Filing Date:

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Effective Receipt Date:

2002-02-27

Submission Type:

Utility Patent Filing

Filing Type:

new-utility

Confirmation Number:

0

Attorney Docket Number:

GEMS8081.097

cn=Timothy J Ziolkowski, ou=Registered Attorneys, ou=Patent and

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Payment Category:

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Deposit Account Number:

70845

Deposit Account Name:

Timothy J. Ziolkowski

TRANSMITTAL FORM

Electronic Version 1.0.3

Stylesheet Version: 1.0

Submission Type: Utility

Patent Filing



Attorney Docket Number:

GEMS8081.097

FIBER OPTIC SCINTILLATOR WITH OPTICAL GAIN FOR A COMPUTED TOMOGRAPHY SYSTEM AND METHOD OF MANUFACTURING SAME

First Named Inventor: Mr. David M. Hoffman

SUBMITTED BY

Name:

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Service Street

Mr. Timothy J. Ziolkowski. Esq.

Registration Number:

38,368

Electronic Signature

Mark: /s/Timothy J. Ziolkowski

Date Signed: 20020227

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I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration

dec1.tif

declaration
bibd-transmittal
fee-transmittal
specification

e-transmittal submitfee.xml
pecification PatApp.xml
tached Image File(s):

dec2.tif

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Attached Image File(s): dec1.tif dec2.tif Comments:

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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTY. DOCKET NO. GEMS8081.0

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FIBER OPTIC SCINTILLATOR WITH OPTICAL GAIN FOR A COMPUTED TOMOGRAPHY SYSTEM AND METHOD OF MANUFACTURING SAME.

Number I hereby state that I have r	is attached hereto unless the following as US Application and was amende reviewed and understood the conditional to above. I acknowledge the different acknowledge the differe	ation Serial No. or	PCT In	(if applicable).	ng the claims, as amer patentability as define	
	enefits under Title 35, United States Co reign application for patent or inventor(s	ode Section 119 of any	y foreign a	pplication(s) for patent or invocation of	ventor(s) certificate listed bon which priority is claimed	
COUNTRY	APPLICATION NUMBER	BER DATE FILED		PRIORITY CLAIMED UNDER 35 U.S.C. 119		
				YES:		
Provisional Application				YES:	NO:	
I hereby claim the benefit under T	Title 35, United States Code Section 119(APPLICATION SER			nal application(s) listed below:		
U.S. Priority Claim	Title 35 United States Code Senting 1999					

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of ea claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Secti prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NUMBER	FILING DATE	STATUS(patented/pending/abandoned)
POWER OF ATTORNEY:		

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) listed below to prosecute this application and transact all business in the Patrademark Office connected therewith.

Timothy J. Ziolkowski, Reg. No. 38368 Joseph P. Fox, Reg. No. 41,760 J. Mark Wilkinson, Reg. No. 48,865

along with the following registered attorneys and agents of GENERAL ELECTRIC COMPANY, 3000 North Grandview Boulevard, W-710, Waukesha, Wisconsin 53188:

Michael A. Della Penna, Reg. No. 45,697 Peter Vogel, Reg. No. 41,363

along with the following registered attorneys and agents of GENERAL ELECTRIC COMPANY, 3135 Easton Turnpike, W3C, Fairfield, Connecticut 06-

Jay L. Chaskin, Reg. No. 24,030 Ronald E. Myrick, Reg. No. 26,315 Henry J. Policinski, Reg. No. 26,621

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Timothy J. Ziolkowski	3 3
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; an that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Sect of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: <u>David M. Hoffman</u>	Chimanal II to B.C.
Residence/Post Office Address: 13311 West Sunnvview, New Berlin, WI 53151	Citizenship: <u>United States of America</u>
Dandy Hellman	2/2//
Inventor's Signature	Date Of Old Of

FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

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TOTAL FEES AUTHORIZED: \$ 1034

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number:

07-0845

Deposit Account Name:

General Electric Company

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

SUBMITTED BY

Authorized Name:

Timothy J. Ziolkowski

Electronic Signature Mark:

/s/ Timothy J. Ziolkowski

Date Signed:

20020227

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid	
Utility Filing Fee	101	\$ 740	

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 27	103	\$ 18	7	\$ 126
Independent Claims: 5	102	\$ 84	2	\$ 168

Subtotal For Extra Claims Fees: \$ 294